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CONFIRMATION NO. 8734

<b>SERIAL NUMBER</b> 10/607,636	<b>FILING OR 371(c) DATE</b> 06/27/2003 <b>RULE</b>	<b>CLASS</b> 250	<b>GROUP ART UNIT</b> 2878	<b>ATTORNEY DOCKET NO.</b> MEI-P12.1-US
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/393,180 07/01/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None TXL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
 09/22/2003

\*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 9	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <i>TXL</i>	Initials			

## ADDRESS

21616

## TITLE

Non-contact safety system

<b>FILING FEE RECEIVED</b> 440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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